James A. Burkush Chief of Department



City of Manchester

Fire Department

Fire Prevention Bureau

APPLICATION FOR INSTALLATION OF SPRINKLER SYSTEM

Project Name and/or Building #: Owner's Name: Address: Date Received	Project Address:		(Fire Department use only)
Owner's Name: Address: Phone #: Installer's Name: Installer's Name: Date Reviewed Application # Date Reviewed Installer's Name: Designer's Address: Designer's Name: Designer's Name: Designer's Phone #: N.I.C.E.T. Certification #: Type of Building: Type of Occupancy: Number of Stories: Manufacturer of Equipment: # of Valves: # Flow Alarm: # of Heads & Temperature: Name of Fire Alarm Installer: Provide the Following With Application: Plot Plan One Line Riser Diagram Showing Proposed Zoning Equipment must be installed in accordance with N.F.P.A. and Manchester Fire Department Rules and Regulations governing sprinkler systems and nentallation instructions. Permits and Inspections shall be required for all new installations and to any work or modification to an existing sprinkler systems and nentallation instructions. Permits and Inspections shall be required for all new installations and to any work or modification to an existing sprinkler systems and nentallation instructions. Permits and Inspections shall be required for all new installations and to any work or modification to an existing sprinkler systems and nentallation instructions. Permits and Inspections shall be required for all new installations and to any work or modification to an existing sprinkler systems and nentallation instructions. Permits and Inspections shall be required for all new installations and to any work or modification to an existing sprinkler systems and nentallation.			
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Signature of Owner or Applicant	Date.		Signature of Owner or Applicant

NOTE: Upon receipt of application, properly executed, applicant will be advised as to the submittal of additional information and data required, such as detailed description, drawings, photographs, or laboratory test reports.